PTO/SB/06 (08-03)

Approved for use through 7.0 1/2006, OMB 0651-0032
U.S. Patent and Trademark Office: U.S. BEPARTMENT OF COMMERCE

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875                                                                                                          |                                                                 |                                           |                                  |                                             |                                         |                    |                         | Application or Docket Number |                            |                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------|----------------------------------|---------------------------------------------|-----------------------------------------|--------------------|-------------------------|------------------------------|----------------------------|------------------------|
|                                                                                                                                                                                  |                                                                 |                                           | (IMS AS FILED — PA<br>(Column 1) |                                             | • • • • • • • • • • • • • • • • • • • • |                    | SMALL ENTITY            |                              | OTHER THAN<br>SMALL ENTITY |                        |
|                                                                                                                                                                                  | FOR .                                                           | NUMB                                      | NUMBER FILED                     |                                             | NUMBER EXTRA                            |                    | FEE                     |                              | RATE                       | FEE                    |
|                                                                                                                                                                                  | IC FEE<br>CFR 1.15(a))                                          |                                           |                                  | .,                                          | •                                       |                    |                         | OR                           |                            | 5                      |
|                                                                                                                                                                                  | AL CLAIMS<br>CFR 1.16(c)                                        |                                           | minus 20                         |                                             |                                         | X 5 =              |                         | OR                           | X 5 =                      |                        |
| IND                                                                                                                                                                              | EPENDENT CLA                                                    | MS .                                      | minus 3                          | <del></del>                                 | ·                                       |                    |                         | i •                          |                            | <del></del>            |
| (37 CFR 1.16(b)) minus 3 =  NULL TIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))                                                                                                  |                                                                 |                                           |                                  |                                             |                                         | <del> </del>       | OR .                    | X \$=                        | <u> </u>                   |                        |
| Mu                                                                                                                                                                               | TIPLE DEPENDE                                                   | NI CLAIM PRESCR                           | 7 CFH 1.16(d))                   | <u>  •                                 </u> | <del> </del>                            | OR .               | + \$=                   |                              |                            |                        |
| * If the difference in column 1 is less than zero, enter *0* in column 2.                                                                                                        |                                                                 |                                           |                                  |                                             |                                         | TOTAL              | <u> </u>                | OR.                          | TOTAL                      | L                      |
| CLAIMS AS AMENDED - PART II                                                                                                                                                      |                                                                 |                                           |                                  |                                             |                                         |                    |                         |                              |                            |                        |
| ď                                                                                                                                                                                | 21-06                                                           | (Column 1)                                |                                  | (Cotumn 2)                                  | (Column 3)                              | SMALL              | ENTITY                  | OR                           |                            | R THAN<br>ENTITY       |
| OMENT .                                                                                                                                                                          |                                                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                        | RATE               | ADOI-<br>TIONAL<br>FEE  |                              | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                  | Total<br>(37 CFR 1,16(c))                                       | . 18                                      | Minus                            | <i>20</i>                                   |                                         | x s=               |                         | OR                           | x's=                       |                        |
| MENDM                                                                                                                                                                            | Independent<br>(37 CFR 1.16(b))                                 | · Q                                       | Minus                            | <u> 3</u>                                   |                                         | x s =              |                         | OR                           | x s =                      |                        |
| AM                                                                                                                                                                               | FIRST PRESENT                                                   | TATION OF MULTIPLE                        | DEPENDE                          | NT CLAIM (37 CF                             | R 1.16(d))                              | +s=                |                         | OR                           | +5 =                       | 1                      |
|                                                                                                                                                                                  |                                                                 |                                           |                                  |                                             |                                         | TOTAL              |                         | OR                           | TOTAL                      | ·                      |
| <b>ا</b> کر                                                                                                                                                                      | -DY                                                             | O                                         |                                  | ADD'L FEE                                   |                                         | UR                 | ADO'L FEE               | <u> </u>                     |                            |                        |
| (Column 1) (Column 2) (Column 3)  CLAMAS , MIGHEST                                                                                                                               |                                                                 |                                           |                                  |                                             |                                         |                    |                         |                              |                            |                        |
| AMENDMENT                                                                                                                                                                        |                                                                 | REMAINING<br>AFTER<br>AMENDMENT           |                                  | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA                        | RATE               | ADDI-<br>TIONAL*<br>FEE |                              | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                  | Total<br>(37 CFR 1.16(4))                                       | 30                                        | Minus                            | " <i>D</i>                                  |                                         | X \$=              |                         | OR                           | X 5 =.                     |                        |
|                                                                                                                                                                                  | Independent<br>(37 OFR 1.16(b))                                 |                                           | Minus                            | "(A)                                        | -                                       | X \$=              |                         | OR                           | x s=                       |                        |
|                                                                                                                                                                                  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 CFR ) 1860    |                                           |                                  |                                             |                                         |                    |                         | OR                           | +5 =                       |                        |
| *AMOI J. 1000 W/30E                                                                                                                                                              |                                                                 |                                           |                                  |                                             |                                         | TOTAL<br>ADO'L FEE |                         | OR                           | TOTAL<br>ADD'L FEE         |                        |
| Ŀ_                                                                                                                                                                               |                                                                 | (Column 1)                                |                                  | (Column 2)                                  | (Column 3)                              |                    | •.                      |                              |                            |                        |
| AMENDMENT                                                                                                                                                                        |                                                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                        | RATE               | ADDI-<br>TADNAL<br>FEE  | ,                            | . RATE                     | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                  | Total<br>(27 CFR 1.14(c))                                       | •                                         | Minus                            |                                             |                                         | X \$=              |                         | OR -                         | x s =                      |                        |
|                                                                                                                                                                                  | Independent<br>(37 CFR 1 16(b))                                 | •                                         | Minus                            | ***                                         | •                                       | x s=               |                         | OR                           | x s =                      |                        |
|                                                                                                                                                                                  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(0)) |                                           |                                  |                                             |                                         | +5 =               |                         | OR                           | + 5 :                      |                        |
|                                                                                                                                                                                  |                                                                 |                                           |                                  |                                             |                                         | TOTAL<br>ADO'L FEE | -                       | or.                          | TOTAL<br>ADD'L FEE         |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3,                                                                                              |                                                                 |                                           |                                  |                                             |                                         |                    |                         |                              |                            |                        |
| " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". |                                                                 |                                           |                                  |                                             |                                         |                    |                         |                              |                            |                        |

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDIRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.